



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 3460

<b>SERIAL NUMBER</b> 10/676,265	<b>FILING OR 371(c) DATE</b> 10/02/2003 <b>RULE</b>	<b>CLASS</b> 165	<b>GROUP ART UNIT</b> 3744	<b>ATTORNEY DOCKET NO.</b> 2507-8637.1US (22235-US-0)
------------------------------------	---	---------------------	-------------------------------	---

**APPLICANTS**

Edward J. Kroliczek, Davidsonville, MD;  
 Michael Nikitkin, Ellicott City, MD;  
 David A. Wolf SR., Baltimore, MD;

**\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/415,424 10/02/2002  
 and is a CIP of 10/602,022 06/24/2003 PAT 7,004,240  
 which claims benefit of 60/391,006 06/24/2002  
 This application 10/676,265  
 is a CIP of 09/896,561 06/29/2001 PAT 6,889,754  
 which claims benefit of 60/215,588 06/30/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 01/10/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> MD	<b>SHEETS DRAWING</b> 24	<b>TOTAL CLAIMS</b> 51	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials		

**ADDRESS**

60794

**TITLE**

Evaporator for a heat transfer system and related methods

<b>FILING FEE RECEIVED</b> 2534	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
--	---	--